

Northwest Ohio Educational Service Center
**APPLICATION FOR APPROVAL OF COURSEWORK
TO BE TAKEN FOR REIMBURSEMENT**

**APPLICATION
FORM**

SUBMIT COMPLETED FORMS TO THE SUPERINTENDENT
PRIOR TO THE START OF THE COURSE

NAME: _____ Last 4 digits of SS#: _____

HOME STREET ADDRESS: _____

CITY/STATE/ZIP: _____

POSITION WITH NwOESC: _____

Are you employed by NwOESC under a supplemental or alternative license? Check: Yes ___ No ___

I am applying for reimbursement of the following college coursework expenses:

COURSEWORK NUMBER: _____ (only one course per application form)

COURSEWORK TITLE: _____

COLLEGE/UNIVERSITY: _____

of semester hours earned through this course will be: _____

TUITION COST PER HOUR/COURSE: _____

COURSE START DATE: _____ COURSE ENDING DATE: _____

Employee's Signature Date

If this request is approved, additional paperwork will be required upon completion of the coursework for payment to be processed.
****PAYMENTS FOR COURSEWORK ARE MADE TO CURRENT EMPLOYEES IN OCTOBER OF EACH YEAR****
Please refer to your staff handbook for additional information on the guidelines for tuition reimbursement through the NwOESC.
A copy of this application will be returned to you after action is taken by the superintendent.

*****OFFICE USE*****

____ Request Approved Remarks: _____

____ Request Denied _____

Superintendent's Signature Date